STATE OF READINESS FOR THE HEALTH SYSTEM OF UKRAINE FOR IMPLEMENTATION OF A NEW MODEL OF REHABILITATION AID

Myronyuk I. S.

INTRODUCTION
The World Health Organization (WHO) believes that rehabilitation services are a public health strategy that is largely targeted at specific people and can be implemented through specific rehabilitation programs (typically for people with disabilities) or integrate into other health sector programs and services, such as primary health care programs, psychiatric, ophthalmic, or cardiac care. Today, the situation in Ukraine is a complete reboot of the entire healthcare system. Thus, there are parallel processes of systemic changes both in the system of providing medical care to the population, as well as in the process of creating and becoming a public health system of Ukraine and a new system of providing rehabilitation assistance to the population. In different sectors of the health care system, reforms are being implemented at different speeds and, naturally, there are situations where reforms in one component of the country’s health and safety sector are slightly ahead of the changes in the other one. So, in Ukraine, systematic changes in the organization of provision of medical care to the population at the primary level have been practically introduced: a new financing model has been formed, changes in the organization of work have been introduced, and basic functions of family medicine and general practice have been outlined. At the same time, rehabilitation services, medical, physical, and other types of rehabilitation, both at the primary level of medical care and at the level of territorial communities, are currently under

2 Про державні фінансові гарантії медичного обслуговування населення: Закон України (2018). Відомості Верховної Ради (ВВР), № 5, ст. 31
development. In 2015, a WHO Mission worked in Ukraine to assess the state of rehabilitation assistance to the country’s population. Mission experts have made it clear that Ukraine needs to implement a National Plan on Limitation of Life, Health and Rehabilitation that would, in particular, address a number of problems of non-compliance of the existing rehabilitation system in the country with international standards. Yes, it has been determined that the very concept and understanding of «disability» does not correspond to a modern and internationally agreed understanding of the limitations of life and function; legislation and by-laws on rehabilitation in Ukraine are fragmented, there is a lack of coordination between authorized ministries and organizations; there is no holistic system of rehabilitation services covering all phases and levels of assistance; rehabilitation services are not available to many people in need; staffing for rehabilitation does not meet world and European standards. At the same time, WHO itself recognizes that Ukraine’s listed problems in rehabilitation are not purely Ukrainian and are characteristic of many countries. Thus, the unresolved global rehabilitation tasks are due to the fact that the current demographic trends and the dynamics of the population’s health indicators place new tasks before the health care system, and therefore the need for rehabilitation services is increasing. The proportion of the elderly is increasing in the population structure and it is projected that by 2050 the proportion of people over 60 will double. In addition, more people are living with non-communicable diseases and the effects of various injuries. The prevalence of non-communicable diseases alone has increased by 18% over the last 10 years. Most often, these disorders limit the functionality of the individual and contribute to the growth of disability. Since the recommendations and conclusions of the WHO Special Mission have been made public, a considerable period of time has passed, and the rehabilitation system in Ukraine is progressing slowly and needs to be implemented in practical health care.

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1. Legal regulation of the rehabilitation assistance system in Ukraine: the state of the issue

The legal framework for the rehabilitation assistance system is fragmented and not in line with the international commitments made by Ukraine, namely the Convention on the Rights of Persons with Disabilities, which entered into force for Ukraine in March 2010\(^7\). Thus, the Law of Ukraine, which regulated the whole system of providing rehabilitation assistance in the country (the Law of Ukraine «On Rehabilitation of Persons with Disabilities in Ukraine») in the 2005 version, extended exclusively to persons with disabilities and did not take into account the need to provide rehabilitation services to persons immediately after the acquisition of impaired health in order to prevent the actual fact of disability\(^8\). Some changes have been made to this version of the Law. Thus, in 2011, in order to fulfill the requirements for implementation of the UN Convention on the Rights of Persons with Disabilities, the Law of Ukraine «On Rehabilitation of Persons with Disabilities in Ukraine» was amended to define the terms «disabled», «disabled child» and «disability». Emphasis was placed not on the state of health of the individual, but on the establishment of a close link between the person with health disorders and obstacles in society, which could lead to a limitation of life of such person. Since the beginning of the armed conflict in eastern Ukraine, this Law was amended in 2014, in particular by categories of persons who may have needed rehabilitation services as a result of an anti-terrorist operation. With some modifications, the Act now extends to 16 additional categories of persons. Consequently, without changing the approach to rehabilitation and leaving the existing structure of rehabilitation services for people with disabilities, it simply added 16 categories of persons with health disabilities resulting from the armed conflict. Positive is the formal extension of the service to obtain technical and other means of rehabilitation, means of medical appointment to the victims of the armed conflict, disability which has not been established\(^9\). But such point changes in the basic state regulatory system of rehabilitation of the act could not shift from the «dead point» the process of

\(^7\) Конвенція про права осіб з інвалідністю (Конвенція про права інвалідів): Верховна рада України. [Електронний ресурс] – Режим доступу: https://zakon.rada.gov.ua/laws/show/z0417-19


\(^9\) Мойса Б., Павліченко О., Мартиненко О. Реабілітація жертв конфлікту. Чи пропонує держава щось, крім встановлення інвалідності та милиці? Українська Гельсінська спілка з прав людини. К., 2018. 64 с.
reforming the system. Therefore, in 2016 a draft law was submitted by the
deputy group for consideration by the Verkhovna Rada of Ukraine, which
regulates the activity of the rehabilitation assistance system – the draft law of
Ukraine of April 15, 2016 No. 4458 “On Disability Prevention and
Rehabilitation System in Ukraine”\textsuperscript{10}. In the text of this draft in Article 1; The
definition of terms has already been significantly expanded as a list of basic
concepts, so their interpretation is adjusted in accordance with generally
accepted international standards. The categories of persons covered by the
Law have been expanded, including citizens of Ukraine and foreigners in
need of rehabilitation services. Although this draft Law of Ukraine has not
been adopted, it envisaged many significant innovations. In 2017, the
President of Ukraine submitted another Draft Law of Ukraine, namely, “On
the Rehabilitation System in Ukraine”\textsuperscript{11}. In addition to the introduction of
new concepts in accordance with international standards – «physical
therapy», «ergotherapy» and others, this draft legislative act contains key
provisions that refer to persons in need of rehabilitation: 1) persons with life-
limitation; 2) persons, whose illnesses, injuries, or birth defects can lead to
permanent loss of life.

At the same time, while the central legislative body of Ukraine is
considering draft laws on the regulation of the rehabilitation assistance
system in the country, the central executive authorities are actively
implementing the normative regulation of providing rehabilitation assistance
to the population according to international standards. Thus, the start of the
implementation of the Plan of Measures for Implementation of the
International Classification of Functioning, Life and Health Limitations and
the International Classification of Functioning, Limitation of Life and Health
of Children and Adolescents approved by the Decree of the Cabinet of
Ministers of December 28, 2017 # 288 On its implementation by the
Ministry of Health of Ukraine by the order of May 25, 2018 under No. 981
approved the official translation of the International Classification of
Functions, Limitations and International Classification of Functioning, Life
and Health Limitations of Children and Adolescents.

The first decisive step towards significant changes in the system of
rehabilitation assistance to the population was the introduction by the
Ministry of Economic Development and Trade of Ukraine of amendments to

\textsuperscript{10} \textsuperscript{10}Про попередження інвалідності та систему реабілітації в Україні: проект Закону
JH3FU00A.html

\textsuperscript{11} \textsuperscript{11}Про систему реабілітації в Україні: проект Закону України [Електронний ресурс] –
Режим доступу: https://novynarnia.com/2017/10/02/zakon-ukrayini-pro-sistemu-reabilitatsiyi-
v-ukrayini-proekt/
the National Classifier of Ukraine DK 003: 2010 “Classifier of professions”. In particular, by Amendment # 5 the following professions were officially introduced to the classifier in Ukraine: 2221.2 “Physician of Physical and Rehabilitation Medicine”; 2229.2 Physical Therapist and 2229.2 Ergotherapist. By this document, these professions have been formally formalized in Ukraine.

Another important step in building a rehabilitation system for the population was to identify new professions, for example, in 2017, the Ministry of Health of Ukraine introduced changes to the Handbook of qualification characteristics of workers’ professions. Issue 78 «Health Care», «Professionals» section introduced the following professions: Physical and Rehabilitation Physician, Physical Therapist and ergotherapist. In 2018, the list has also been supplemented by the professions of Physical Therapist Assistant and Occupational Therapist Assistant, which have been added to the Specialists section.12. This normative document of the Ministry of Health of Ukraine regulates the tasks and duties of health professionals. Important is the fact that this order provides qualification categories not only for the medical profession – physician of physical and rehabilitation medicine, but also for physical therapists / ergotherapists and their assistants. The implementation of this provision is important and promising, since it creates the basis for the introduction of a system of continuous professional development and continuous training of physical therapists, ergotherapists and their assistants by analogy with a similar system introduced in the country for doctors. At the same time, at present, the system of postgraduate education, training and certification of both physical therapists / ergotherapists and assistants of the physical therapist or ergotherapist has not been developed in the country.

Thus, at the beginning of 2019, Ukraine has practically created a base for staffing the updated system of rehabilitation assistance to the population at all levels of health care assistance. However, the introduction of new posts in budgetary health care institutions was formally hindered by the provisions of the Ministry of Health of Ukraine Regulations No. 38513 of October 28, 2002. This order determined the list of health care institutions, medical, pharmacist and pharmacy specialist who obtain education in health care institutions. The head of the budget health care institution may not enter in

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the staff list of the institution the positions that are not provided in the list. Therefore, in March 2019, it was formalized the possibility of entering the positions of the said specialists (physicians and rehabilitation doctors, physical therapists / ergotherapists and their assistants) in the health care institutions of Ukraine by amending the relevant regulatory order of the Ministry of Health of Ukraine of October 28, 2002 № 385. Today, health care managers of all forms of ownership and of all levels of care can enter these positions in the staffing lists of institutions. The central executive body also took into account the specific features of the training of rehabilitation specialists that existed in Ukraine until recently. Thus, until February 1, 2017, specialists were trained in the system of rehabilitation assistance in the field of knowledge 0102 Physical education, sports and human health and specialties (areas of training) of human health, physical rehabilitation and fitness and recreation. The diplomas of bachelors, masters, who completed their studies in these specialties or areas, indicated, in particular, a specialist in physical rehabilitation (often in conjunction with the qualification of a coach for the chosen sport or physical education teacher). Of course, finding a graduate with such a diploma in health care was problematic, and they mostly implemented themselves in the system of rehabilitation assistance in the existing positions of massage nurses or instructors of physical therapy in sanatorium establishments. Changes in the training of specialists at higher educational establishments of Ukraine began only in 2017, when the Decree of the Cabinet of Ministers of Ukraine of February 01, 2017 No. 53 introduced changes to the list of fields of knowledge and specialties for which higher education applicants are trained in Ukraine.

Namely, in the field of knowledge 22; Health care introduced the specialty 227 «Physical therapy. Ergotherapy». Therefore, in view of such peculiarities of training of specialists in physical rehabilitation, which have existed in Ukraine until recently, the Ministry of Health of Ukraine issued a separate clause in the order No. 668¹⁴ of 25.03.2019, granting employment for the positions of physical therapists, ergotherapists and their assistants, specialists and bachelor specialists educated in the specialty «Physical Rehabilitation» and the direction of preparation «Human Health». At the same time, it should be kept in mind that the employment of persons with a diploma qualification as a specialist in physical rehabilitation is possible provided they have completed their specialization in physical therapy within five years from the moment of employment.

Ukraine’s education system, in particular higher education, has also responded quickly to the need to build a new rehabilitation system in the

¹⁴ Так само.
country. Thus, in addition to introducing new specialties for higher education applicants, the Ministry of Education and Science of Ukraine has developed, publicly discussed and implemented a new Higher Education Standard of Ukraine: first (bachelor) level, field of knowledge 22 «Health», specialty 227 «Physical Therapy, ergotherapy». The relevant standard of master’s training has already been publicly discussed and is undergoing approval and signing.

Thus, today in Ukraine, a sufficient list of legal and regulatory documents has been practically developed and put into effect to launch a new model of rehabilitation assistance to the population, which should affect both the health indicators of the population as a whole and the reduction of the levels of disability of the Ukrainian population that exceed similar figures in most countries today.15

2. Assessment of the readiness of the practical system of providing medical assistance to the population for the implementation of the new system of rehabilitation assistance

In our opinion, assessing the readiness of the existing system of providing medical care to the population of Ukraine, as a practical component of the health care system, for the implementation of new approaches to providing rehabilitation care can be based on different approaches. First of all, it should be noted that there are already a number of health care facilities in the country where processes of introducing new approaches to providing rehabilitation assistance to different categories of population are taking place. These are mainly specialized rehabilitation centers of different ownership forms, separate departmental health institutions of the Ministry of Defense of Ukraine and some others. At the same time, against the backdrop of the entire health care system in the country, these facilities should most likely be considered as exceptions to the rule. The system’s readiness to innovate can also be approached differently and from different perspectives. In particular, it is possible to assess the readiness of the material base and, probably, in the vast majority of health facilities located in small settlements, it will not be sufficient. At the same time, the weak material and technical base, in our opinion, is not the main obstacle to the rapid implementation of the updated system of rehabilitation care at different levels of health care delivery to the population.

More important at this stage of establishing a new rehabilitation care system as part of the health care delivery system, in particular, is the willingness of health care managers and health care professionals to cooperate with physical and medical rehabilitation specialists at all stages of health care assistance and availability of such specialists is sufficient at labor market. These are the very aspects that play a key role in determining the location and form of rehabilitation care in health care facilities in the early stages of the new health care system in Ukraine. For all professionals, the problem of staffing the rehabilitation assistance system remains a significant one. Staffing is now needed in large numbers to ensure the process of patient rehabilitation in healthcare settings. Each patient at the most intensive, sub-acute, rehabilitation stage should receive three hours of individual training daily with a physical therapist, an ergotherapist, or other functional specialist in a multidisciplinary team.

On the one hand, it is necessary to build (reload) high-quality national education of relevant specialists very quickly. On the other hand, work out procedures for regulating new healthcare professionals who, even while working in health care institutions, did not have their own official positions there.

The question of how to organize a rehabilitation service the best has been debated for a long time. Some countries have programs that set up specialized rehabilitation departments (specialized approach). Other countries have emphasized improving the training of medical students through integrated training in rehabilitation methods in combination with the preventive and curative aspects of disability. This approach aims to encourage all physicians to undertake rehabilitation as an integral part of their daily work (non-specialized approach). It should be noted that both specialized and non-specialized approaches have proven to be viable. Therefore, both approaches should be used in the reorganization of medical care and training in higher education institutions in Ukraine16.

The problem of saturation of the labor market by trained specialists in physical and medical rehabilitation in the first stages will be one of the decisive ones. Indeed, in 2017, the higher education system of Ukraine launched the first bachelor’s degree in the specialty 227. Physical therapy. Ergotherapy. These specialists may be employed employed in the future as Physical Therapist Assistants (ergotherapist assistants) or continue their Master’s Degree in a specialty or 227.1. Physical therapy or 227.2.

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Ergotherapy. So, the first bachelor’s degree in specialty 227.Physical therapy. Ergotherapy is expected in Ukraine only in 2021. At the same time, this is not a significant problem, because today, firstly, the posts of assistants to the physical therapist or ergotherapist in health care institutions are practically not introduced, secondly: if such a position is introduced by the head of the health care institution, he may not accept a full-time bachelor’s degree in physical rehabilitation, which has been produced in Ukraine for quite some time. The first issues of masters of physical therapy and ergotherapy, as well as specialization of doctors in the specialty «physician of physical and rehabilitation medicine» in Ukraine have already taken place. Of course, the number of trained specialists in these specialties will not meet all the needs of healthcare institutions. However, today there is another problem – it is the formation of a range of vacancies for rehabilitation professionals in healthcare facilities.

Of course, sanatorium establishments, which traditionally operate in the market of rehabilitation and rehabilitation treatment services, have gradually started to enter the positions of relevant specialists in the staff lists. At the same time, health care facilities that provide emergency and planned medical care in the attached territories are practically unplanned. This situation is caused by the considerable level of uncertainty of the work of such institutions in the conditions of reformation of the secondary and tertiary level of providing medical care, which is currently actively implemented in the country. Yes, the transition of health care institutions to new forms of management (transition from municipal (state) institutions to the status of medical non-profit enterprises), change of the principle of financing: for the rendered medical services and treated cases, and not for the maintenance of the institution is a challenge for the effective functioning of each a separate institution in the new environment. Therefore, reorganizing the work of the institution through the re-profiling of departments, positions and directions of rendering medical (and rehabilitation) services in such conditions is considered by managers to be quite risky.17

However, the situation may change dramatically in the nearest future. Namely, from January 1, 2020 in connection with the implementation of the full scope of the Health Guarantee Program, which is being implemented in Ukraine for the implementation of the Law of Ukraine “On State Financial Guarantees of Public Health Services”. Thus, the National Health Service of Ukraine will purchase medical services in health care facilities of all levels

of care, organizational and legal form (except budgetary institution) and form of ownership and pay for them under the contract. The procurement procedure for medical services will require providers to comply with the terms of service and specifications for specific services / groups of services. The important fact is that rehabilitation services (both medical and physical rehabilitation) are provided for in the vast majority of packages of medical services that will be purchased by the National Health Service of Ukraine for budgetary funds. In addition to 2020, the purchase of medical services under the package «Medical Rehabilitation» is also envisaged. The requirements for the Medical Rehabilitation Package include the provision of inpatient or outpatient medical rehabilitation to patients with diseases in the recovery period, that is, beyond the acute period, in particular:

– adults and children from three years of age with disorders of the nervous system;
– adults and children from three years old with impaired function of the musculoskeletal system;
– children born prematurely and / or ill during the first three years of life.

Medical rehabilitation services for patients in the acute period of the disease are provided in packages of services provided in the inpatient setting and will, accordingly, be paid according to the treated case.

Importantly, there are clear requirements for the logistics and staffing of each paid service package. For example, the package «Medical Rehabilitation / Rehab for Infants Who Have Been Prematurely and / or Sick during the First Three Years of Life» provides the following requirements for staffing the healthcare facility for that package to receive payment for its delivery.

**Requirements for specialization of medical workers:**

1. Pediatrician; at least two people working in the main place of work in one institution.

2. Physician holding a valid certificate of a specialist of a doctor in the field of specialization: physician in physical and rehabilitation medicine, physical therapist, ergotherapist, physician in therapeutic exercise and sports medicine – at least two people working at the main place of work in this institution.

3. Physical Therapist Assistant – at least two people working in the main place of work in this institution.

4. Assistant ergotherapist – at least two people who work at the main place of work in this institution.

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5. Speech therapist for conducting neurorehabilitation activities for adults and children – at least two people working in the main place of work in this institution.

6. Psychologist – at least two persons who work at the main place of work in this institution.

7. Pediatric ophthalmologist (according to the concluded contracts).

8. Physician-surgeon (in accordance with the concluded contracts).

9. A medical nurse practicing in physical education, or a nurse practitioner who has received training in medical rehabilitation and has received a qualification in the specialty «Physical rehabilitation» or has acquired additional knowledge in the specialization in nursing in medical rehabilitation.

Therefore, secondary and tertiary (specialized and highly specialized) pediatric hospitals will need to be staffed in the near future by staff members: both physical and rehabilitation physicians, physical therapists, ergotherapists and their assistants. There is a clear requirement for each of the specialties: at least two persons working in the main place of work in this institution.

Similarly, clear requirements for staffing of rehabilitation care professionals are laid down in the requirements for the provision of packages of secondary and tertiary (highly specialized) medical care for common diseases and pathological conditions, which is provided in almost all multidisciplinary health care establishments. For example, in the package of medical services «Medical Assistance for Acute Stroke» the following requirements for specialization of medical workers are given:

1. Neuropathologist having adequate training in the provision of medical assistance for acute stroke – not less than 4.75 full-time positions (around the clock).

2. Anesthesiologist – at least 4.75 full-time positions (around the clock).

3. Physical and Rehabilitation Physician / Physical Therapist / ergotherapist / Physical Education Physician / Sports Medicine Physician – at least 2 full-time members of staff at this institution.

4. Speech therapist (language and speech therapist) – at least one person working in the main place of work in this institution (preferably).

5. Nurse – no less than 4.75 full-time positions (around the clock) for every 4 beds where patients with acute stroke are hospitalized.

Based on the above, virtually all health care institutions, regardless of the level of care, specialization and ownership in the near future, will need to equip jobs and recruit specialists for rehabilitation care in various specialties. Of course, if this institution wants to apply for budgetary funds for medical

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and rehabilitation services. If the planned innovations are implemented, all the conditions will be in place in the country for the rapid and effective development of a new rehabilitation assistance system as an integral part of Ukraine’s health care system.

CONCLUSION
Subsequent to the work of the WHO Assessment Mission (2015), which assessed the state of rehabilitation assistance to the country’s population and concluded that the system of rehabilitation assistance in Ukraine did not meet international standards, significant changes had taken place. Today, through the efforts of central executive bodies, national agencies and the expert environment in Ukraine, a sufficient list of regulatory documents has been practically developed and put in place to launch a new model of the system of rehabilitation assistance to the population. Thus, new professions of rehabilitation specialists were introduced (physician of physical and rehabilitation medicine, physical therapist, ergotherapist and assistants of the physical therapist and ergotherapist), conditions were created for the introduction of appropriate positions in the staff lists of educational institutions of health care, and the process of training of staff was started in Ukraine. At present, there are practically no legal barriers to the introduction of a new rehabilitation system in the country. The shortage of trained professionals and of the health care system staff at the level of health care institutions for the introduction of new posts and the development of the provision of rehabilitation services to the population may be overcome in the near future. The implementation of new conditions for payment of budgetary funds for the provision of medical services on the basis of packages of medical services of the National Health Service of Ukraine under the concluded contracts will force the health care institutions to fulfill the conditions of personnel and material support of these packages. Practically all of the offered packages of medical services provide rehabilitation services, which should be provided by full-time workers – specialists of rehabilitation assistance.

If the planned innovations are implemented, all the conditions will be in place in the country for the rapid and effective development of a new rehabilitation assistance system as an integral part of Ukraine’s health care system.

SUMMARY
The paper presents the results of the assessment of the readiness of the health care system of Ukraine, including the system of providing medical assistance to the population, for the implementation of the new rehabilitation aid system. The analysis of the legal support of the functioning of the new system of rehabilitation assistance in accordance with international standards
is carried out. Regulations of central executive bodies, ministries and institutions on the introduction of new professions of rehabilitation assistance specialists in the country and the conditions of their professional training and functioning have practically eliminated barriers to the introduction of a new rehabilitation assistance system in the country. The problems presented in the way of rapid implementation of the new system of rehabilitation assistance in the existing system of providing medical services to the population directly at the level of health care institutions of different levels of providing medical assistance to the population are presented. At the same time, the planned implementation in 2020 of new conditions for payment of budgetary funds for the provision of medical services on the basis of packages of medical services of the National Health Service of Ukraine under the concluded agreements will create favorable conditions for the rapid development of the rehabilitation assistance system at all levels of its provision.

REFERENCES


**Information about the author:**

Myronyuk I. S.,
orcid.org/0000-0003-4203-4447
PhD, Dean of the Faculty of Health and Physical Education
Uzhhorod National University
3, Narodna Sq., 88000, Uzhhorod, Ukraine